U.S. Patent and Trademark Office. U.S. DEPARTMENT OF COMMERCE

UTILITY PATENT APPLICATION

**TRANSMITTAL** 

Attorney Docket No.	501.43643X00	
First Inventor	EHAMA, MASAKAZU	0
Title	SECURITY SYSTEM	83. 83.
Express Mail Label No.	,	20
	Mail Stop Patent Application	~~~ <u>~~</u> ~~ <u>~~</u>

(Only for new nonprovisional applications under 37 CFR 1.53(b)	11

APPLICATION ELEMENTS SEE MPEP chapter 600 concerning utility patent application contents.

Commissioner for Patents ADDRESS TO: P.O. Box 1450 Alexandria VA 223

1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. з. 🛛

Specification [Total Pages: 28] (preferred arrangement set forth below)

-Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R & D

-Reference to sequence listing, a table, or a computer program listing appendix -Background of the Invention

-Brief Summary of the Invention -Brief Description of the Drawings (if filed)

-Detailed Description -Claim(s)

-Abstract of the Disclosure

4. 🛛 Drawing(s) (35 U.S.C. 113) [Total Sheets: 12] 5. Oath or Declaration [Total Sheets: \_

Newly executed (original or copy)

Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed)

> **DELETION OF INVENTOR(S)** Signed statement attached deleting inventor(s) Named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)

6. Application Data Sheet. See 37 CFR 1.76

·. 🔲	CD-ROM or CD-R in duplicate, large table or
	Computer Program (Appendix)

8. Nucleotide and/or Amino Acid Sequence Submission fif\_applicable, all necessary)

a. Computer Readable Form (CRF) b. Specification Sequence Listing on:

i. . CD-ROM or CD-R (2 copies); or

ii. . D paper

Statements verifying identity of above copies

- · · ·	
	ACCOMPANYING APPLICATION PARTS
9.	Assignment Papers (cover sheet & documents(s))
10.	37 CFR 3.73(b) Statement Power of Attorney (when there is an assignee)
11.	English Translation Document (if applicable)
12. 🛚	Information Disclosure Copies of IDS Citations
_	Statement (IDS)/PTO-1449
13. 🖳	Preliminary Amendment
14. 🖂	Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15.	Certified Copy of Priority Document(s) (if foreign priority is claimed)
16.	Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. 🛚	Other: Figs. 1-12; Credit Card Payment Form;

Date

**MARCH 17, 2004** 

18. If a CONTINUING A	APPLICATION, check ap	propriate box, and supply the re	equisite information below and	d in a preliminary amendment,
or in an Application Dat	a Sheet under 37 CFR 1	1.76:		
Cantinuatio	- Debitatana	Cartiavation in and (CIR)	of originalization No. 1	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

L\_ Divisional Prior application information: Examiner:

Signature

Art Unit:

Continuation-in-part (CIP) of prior application No.:

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

Customer Number 020457 OR Correspondence address below Name ANTONELLI, TERRY, STOUT & KRAUS, LLP Address City State Zip Code Country Telephone (703) 312-6600 Fax (703) 312-6666 Name (Print/Type) Paul J, Skwierawski-Registration No. (Attorney/Agent) 32,173

This collection of information is equired by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Approved for use through 07/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Signature

FEE TRANSMIT AL  for FY 2004    Provided   P	Under the Paperwork Reduction Act of 1995, no persons are require	ea to	to respond to a collection of information unless it displays a valid OMB control number.							
Filing Date    Filing Date	& FFF TRANSMITTAL						Complete if Known			
Eight Named Inventor   EHAMA, MASAKAZU   Eight Named Inventor   EAMA, MASAKAZU   Examiner Name   Examiner Na	© ILL IIVANOMIIIAL			Application Number			<del></del>			
Effective 1701/2003. Patent fees are subject to annual revision.   Examiner Name   Examiner	c for FY 2004	- 1				<del>-                                    </del>		<u> </u>		
Supplicant claims small entity status. See 37 CFR 1.27    Art Unit	S 10111 2001	-				EHAMA, MA	EHAMA, MASAKAZU			
METHOD OF PAYMENT (check all that apply)   FEE CALCULATION (continued)	Effective 10/01/2003. Patent fees are subject to annual revision.		Examin	er Name	В					
METHOD OF PAYMENT (check all that apply)   FEE CALCULATION (continued)   Supposit   Account   Order	Applicant claims small entity status. See 37 CFR 1.27	Į.	Art Unit							
Check   S Credit Card   Money   Other   None Order	TOTAL AMOUNT OF PAYMENT (\$) 942.00		Attorney	/ Docke	t No.	501.43643X	00			
Deposit Account:    Opposit Account	METHOD OF PAYMENT (check all that apply)				FE	EE CALCULATION	ON (continued)	)		
Large Entity   Small Entity   Small Entity   Small Entity   Fee   Fee   Code   Ge   Ge   Ge   Ge   Ge   Ge   Ge		3. /	ADDITIO	ONAL F	EES					
Deposit Account Number Deposit Number Deposit Number Deposit Annonelli, Terry, Stout & Kraus, LLP Code (S) Cod										
Account Number   Account Number   Ceposit   Account										
Deposit Account Antonelli, Terry, Stout & Kraus, LLP   Fee   Code	Account 01-2135	Larg	e Entity	Small E	ntity					
Account   Antonelli, Terry, Stout & Kraus, LLP   Code (\$) and the property of the Director is authorized to: (check all that apply)   1052   50   2052   25   2052   205		Fee	Fee	Fee	Fee				Fee Paid	
The Director is authorized to. (check all that apply) Charge fee(s) indicated below ⊠ Credit any overpayments  □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below fee Pald □ Charge fee(s) indicated below, except for the filling fee □ Charge fee(s) indicated below fee Pald □ Charge fee(s) indicated below fee P		Cod	le (\$)	Code						
Charge fee(s) indicated below										
Charge feets  olidicated below, except for the filling fee	☐ Charge fee(s) indicated below ☐ Credit any overpayments	1052	2 50	2052	25		ovisional filing fee	OL		
□ Charge fee(s) indicated below, except for the filing fee to the above-dentified deposit account.    1805   1,840   1805   1,840   1805   1,840   1805   1,840   1805   1,840   1805   1,840   1805   1,840   1805   1,840   1805   1,840   1805   1,840   1	☐ Charge any additional fee(s) during the pendency of this application.	1053	3 130	1053	130	Non-English specific	cation			
Code		1812	2,520	1812	2,520	For filing a request f	for <i>ex par</i> te reexa	mination		
Examiner action   Examiner a	☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1804	920*	1804	920°		ion of SIR prior to		i	
1. BASIC FILING FEE		1805	5 1,840	1805	1,840	*Requesting publicat	tion of SIR after			
Fee   Paid   1252   420   2252   210   Extension for reply within second month		1254	1 110	2254	e e		within first month			
Code   (5)   Cod	Fig. Fig. Fig. Fig. Boundation					- *		nth		
1002   340   2002   170   Design filing fee   1254   1,480   2255   1,005   Extension for reply within fourth month   1003   330   2003   265   Plant filing fee   1401   330   2401   165   Notice of Appeal   165   Notic	Code (\$) Code (\$)	4		ŀ		· •		****		
1002   340   200   170   2004   385   Plant filing fee   1401   330   2401   165   Notice of Appeal   1401   165								h		
1004   770   2004   385   Reissue filing fee   1402   330   2401   165   Notice of Appeal   1402   330   2402   165   Reinsupport of an appeal   1403   330   2402   165   Reinsue filing appeal   1403   330   2402   165   Reinsue filing appeal   1403   2403   145   Request for oral hearing   2403   145   Request for Poperty (lines number of properties)   2403   240										
1005   160   2005   80   Provisional filing fee   1402   330   2402   165   Filing a brief in support of an appeal   1403   290   2403   145   Request for oral hearing   2403   2403   145   Request for oral hearing   2403   2		1401		2401						
1403   290   2403   145   Request for oral hearing		1402	2 330	2402	165	Filing a brief in supp	ort of an appeal			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Fee from Extra Claims below Fee Paid   1453   1,330   2453   665   Petition to revive – unavoidable	1003   100 20031 00 Provisional lilling lee	1403	3 290	2403	145	Request for oral hea	aring		1 0	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	SUBTOTAL (1) 770	1451	1,510	1451	1,510	Petition to institute a	a public use proce	eding		
Extra Claims below Fee Paid  Total Claims 14 -20** = 0	2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1452	2 110	2452	55	Petition to revive - u	unavoidable			
Total Claims 14 -20** = 0		1453			665	Petition to revive - u	unintentional			
Indep. 5						*	eissue)			
Claims  Multiple Dependent  = 1406 130 1460 130 Petitions to the Commissioner  Multiple Dependent  = 1807 50 1807 50 Processing fee under 37 CFR 1.17(q)  1806 180 1806 180 Submission of Information Disclosure Stmt  Fee Fee Fee Fee Fee Fee Fee Fee Fee Fe						<del>-</del>				
Multiple Dependent = 1806 130 1466 130 Pertulons to the Commissioner   1807 50 1807 50 Processing fee under 37 CFR 1.17(q)   1806 180 1806 180 Submission of Information Disclosure Stmt   1806		1								
Large Entity Small Entity Fee										
Fee	•	1				•				
1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claims, if not paid 1204 86 2204 43 "Reissue independent claims over original patent 1205 18 2205 9 "Reissue claims in excess of 20 and over original patent SUBTOTAL (2) \$ 172.00  **For number previously paid, if greater; For Reissues, see above.  SUBMITTED BY  1809 770 2809 385 Filing a submission after final rejection (37 CFR § 1.129(a)) 1810 770 2810 385 For each additional invention to be examined (37 CFR § 1.129(b)) 1801 770 2801 385 Request for Continued Examination (RCE) 1802 900 1802 900 Request for expedited examination of a design application  Other fee (specify)  *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)  SUBMITTED BY  Complete (If applicable)  Registration No. (Altomey/Agent) 32,173 Telephone 703-312-8600	Fee Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$)					Recording each pate	ent assignment pe	er		
1203 290 2203 145 Multiple dependent claims, if not paid 1204 86 2204 43 "Reissue independent claims over original patent 1205 18 2205 9 "Reissue claims in excess of 20 and over original patent SUBTOTAL (2) \$ 172.00    **or number previously paid, if greater; For Reissues, see above.  SUBMITTED BY  Complete (If applicable)  (37 CFR § 1.129(a))  1810 770 2810 385 For each additional invention to be examined (37 CFR § 1.129(b))  1801 770 2801 385 Request for Continued Examination (RCE)  1802 900 1802 900 Request for expedited examination of a design application  Other fee (specify)  *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)  **Ormplete (If applicable)  Registration No. (Altomey/Agent) 32,173 Telephone 703-312-8600		4000								
1204 86 2204 43 "Reissue independent claims over original patent Subtotal (2) \$ 172.00   1802 900   1802 900   1802 900   Request for expedited examination of a design application   1802 900   Reduced by Basic Filing Fee Paid   Subtotal (3) (\$)    Submitted by Subm	·	1809	5 1/0	2609	305			"		
over original patent  **Reissue claims in excess of 20 and over original patent  **Subtotal (2) \$ 172.00  **For number previously paid, if greater; For Reissues, see above.  SUBMITTED BY  Over original patent  **Redissue claims in excess of 20 1802 900 1802 900 Request for expedited examination of a design application  Other fee (specify)  **Reduced by Basic Filing Fee Paid  Complete (if applicable)  Registration No. (Altomey/Agent)  Registration No. (Altomey/Agent)  703-312-8600		1810	770	2810	385	For each additional	invention to be			
and over original patent SUBTOTAL (2) \$ 172.00  Other fee (specify)  Reduced by Basic Filing Fee Paid  SUBTOTAL (3) \$ 1802 900 Request for expedited examination of a design application  Other fee (specify)  Reduced by Basic Filing Fee Paid  SUBTOTAL (3) \$ 1802 900 Request for expedited examination of a design application  Other fee (specify)  Reduced by Basic Filing Fee Paid  SUBTOTAL (3) \$ 1802 900 Request for expedited examination of a design application  Other fee (specify)  Reduced by Basic Filing Fee Paid  SUBTOTAL (3) \$ 1802 900 Request for expedited examination of a design application  Other fee (specify)  Reduced by Basic Filing Fee Paid  SUBTOTAL (3) \$ 1802 900 Request for expedited examination of a design application  Other fee (specify)  Reduced by Basic Filing Fee Paid  SUBTOTAL (3) \$ 1802 900 Request for expedited examination of a design application  Other fee (specify)  Reduced by Basic Filing Fee Paid  SUBTOTAL (3) \$ 1802 900 Request for expedited examination of a design application  Other fee (specify)  Reduced by Basic Filing Fee Paid  SUBTOTAL (3) \$ 1802 900 Request for expedited examination of a design application  Other fee (specify)  Reduced by Basic Filing Fee Paid  SUBTOTAL (3) \$ 1802 900 Request for expedited examination of a design application  Other fee (specify)  Reduced by Basic Filing Fee Paid  SUBTOTAL (3) \$ 1802 900 Request for expedited examination of a design application  Other fee (specify)  Reduced by Basic Filing Fee Paid  SUBTOTAL (3) \$ 1802 900 Request for expedited examination of a design application  Other fee (specify)  Reduced by Basic Filing Fee Paid  SUBTOTAL (3) \$ 1802 900 Request for expedited examination of a design application  Other fee (specify)  Reduced by Basic Filing Fee Paid  SUBTOTAL (3) \$ 1802 900 Request for expedited examination of a design application  Other fee (specify)	over original patent	1801	770	2801	385			RCF)		
SUBTOTAL (2) \$ 172.00  Other fee (specify)  Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)  SUBMITTED BY  Complete (if applicable)  Registration No. (Attorney/Agent) 32,173  Telephone 703-312-6600						•	,	,		
Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)  SUBMITTED BY  Complete (if applicable)  Registration No. (Attorney/Agent) 32,173  Telephone 703-312-6600	SUBTOTAL (2) \$ 172.00	1								
Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)  SUBMITTED BY  Complete (if applicable)  Registration No. (Attorney/Agent) 32,173  Telephone 703-312-6600	**or number previously paid, if greater: For Reissues, see above	Othe	er fee (spe	cify)					LL	
SUBMITTED BY  Complete (if applicable)  Registration No. (Attorney/Agent) 32,173 Telephone 703-312-6600	or normbor previously paid, it greater, I di Meissaes, see audve.	*Red	duced by I	Basic Fili	ng Fee	Paid	SUBTOTAL (	3) (\$)		
Registration No. Name (Print/Type) Paul-J. Skwlerawski (Attorney/Agent) 32,173 Telephone 703-312-6600		<u> </u>								
Name (Print/Type) Paul-d. \$kwierawski (Attomey/Agent) 32,173 Telephone 703-312-6600		Regist	tration No		r =	Complete (if app	iicabie)			
					32,17	′3	Telephone	703-312-6	600	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450